Amended

2010 ELECTION CYCLE

REPORT OF RE

SECRETARY OF STATE NOV 17 2010 Campaign Finance Secretary of State

DAME SHOWN

Delbert Hosemann

Committee to Elect Scott Phillips Name of Committee Address Post Office Box 1007, Columbia, MS 39429

Telephone (601) 736-9301 Fax (601) 736-7537

Treasurer Samantha Fortenberry

Email kayleebuqnate@yahoo.com

Check here If above is different from previous report

]	YPE OF	REPO	RT
May 10, 2010	Periodic Report	(January 1.	2010.	through.	April 30.	20

, 2010)......Mandatory

November 16, 2010 Pre-Runoff Report (October 24, 2010, through November 13, 2010).........Runoff Candidates

Termination Report (Candidate will no longer accept contributions or make campaign. Required to terminate reporting

expenditures and has no outstanding campaign debt obligation)

IMPORTANT

- Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
- (2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-16-807 (b) (ii) and (iii).
- (3) The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	Itemized + Non-Itemized =		This Period	Calendar Year-To-Date	
Total amount of contributions	\$4,850.00 +\$	250.00	\$5,100.00	\$8,974.99	
Total amount of disbursements	\$4,641.10+\$	300.00	\$4,941.10	\$8,979.68	
Total amount of cash on hand			\$ 0.00		

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

Signature of Director or Treasurer

October 26, 2010

obligations

Authority: Refer to Miss. Code Ann. §23-15-601 (1972) et, seq. for statutory requirements.
Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit veild reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO: 1. Candidates for Statewide, State district, multi-county and all legislative offices about feature form to Secretary of State, Elections Division, P. O. Box 136, Jackson, MS 39205 or Fax to 601-359-1496 or 601-675-3819.

2. Candidates for county-wide and county district offices should return forms to their county Circuit Clark.

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Name of Candidate or Committee Scott Phillips

Reporting period Oct. 11, 2010 through Oct. 26, 2010

ITEMIZED RECEIPTS

A. Source: Corporation PAC Mindividual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Clara and Martins Ugwu Dike	10 /26 /10	\$ 500.00
Mailing Address		\$
1212 Broad Street	1-'-'-	
City, State, Zip Code		s
Columbia, MS 39429		1
Name of Employer (Required) Quality Care Internal Medicine, Inc.		\$
Occupation (Regulard) Medical Doctor and wife	Aggregate year-to-date	\$ 500.00
B. Source: Corporation C PAC Cx Individual C Loan C Other (please specify)	Date (Mo., Day, Year)	Amount of each
Full name Susan Thomson Rutland	10 /13 /10	\$ 1,000.00
Mailing Address 116 Heatherwood Drive		\$
City, State, Zip Code Hattiesburg, MS 39402		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$ 1,000.00
C. Source: Corporation PAG Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Nicholson & Company, PLLC	10 /11 /10	\$ 500.00
Mailing Address Post Office Box 609		\$
City, State, Zip Code Columbia, MS 39429		\$
Name of Employer (Required)		\$
Occupation (Required) Accountants	Aggregate year-to-date	\$ 500.00
D. Source: @ Corporation @ PAC Ø Individual @ Loan @ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Scott Phillips	10 /17 /10	\$ 2,850.00
Post Office Box 3	'	\$
Columbia, MS 39429		\$
name of Employer (Required) Phillips Law Firm, P.A.		\$
Attorney	Aggregate year-to-date	\$ 2,850.00

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Name of Candidate or Committee	Scott	Phillips							
Reporting period October 11,	2010	through _	October	26,	2010				

ITEMIZED DISBURSEMENTS

A. Full name WQID	Date (Mo., Day, Year	Amount of each disbursement this period
Mailing Address		ė
301 Humble STE 134	10/25/10	300.00
City, State, Zip Code	1 7	S
Hattiesburg, MS 39401 Purpose of Disbursement (Optional)		
Radio advertisement	Aggregate Year-to-date	s 300.00
Standard Office Supply & Printing Co.	Date (Mo., Day, Year	Amount of each disbursement this period
Mailing Address		8
Post Office Box 950	10/13/10	353,10
City, State, Zip Code		S
Hattiesburg, MS 39429	-/-/-] •
Purpose of Disbursement (Optional)	Aggregate	\$ 705.00
Campaign Cards	Year-to-date	706.20
C. Full name	Date	A
Flash Media	(Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		S
Post Office Box 908 City, State, Zip Code	<u>10/13/10</u>	3,820.00
		5
Columbia, MS 39429 Purpose of Disbursement (Optional)		
The state of the s	Aggregate	S
Billboards and Banners D. Full name	Year-to-date	3,820.00
Columbian-Progress	Date	Amount of each
Mailing Address	(Mo., Day, Year)	disbursement this period
318 Second Street	10 / 22/10	\$
City, State, Zip Code	10/22/10	168.00
Columbia, MS 39429	7 7	s
Purpose of Disbursement (Optional)		10
Newspaper advertisement	Aggregate	\$ 252.50
E Full name	Year-to-date	252.00
	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		\$
City, State, Zip Code	''	,
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urpose of Disbursement (Optional)		(1000 c)
. Full name	Aggregate Year-to-date	s
	Date (Mo., Day, Year)	Amount of each
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ity, State, Zip Code		
		S
urpose of Disbursement (Optional)	Aggregate Year-to-date	5